

## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

24197 7590 07/28/2003  
**KLARQUIST SPARKMAN, LLP**  
**121 SW SALMON STREET**  
**SUITE 1600**  
**PORTLAND, OR 97204**



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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Wayne W. Rupert (Depositor's name)  
*Wayne W. Rupert* (Signature)  
 Oct 21, 2003 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/622,686      | 10/12/2000  | Juha Kononen         | 4239 55593          | 2751             |

TITLE OF INVENTION: TUMOR TISSUE MICROARRAYS FOR RAPID MOLECULAR PROFILING

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE                   | PUBLICATION FEE | TOTAL FEE(S) DUE            | DATE DUE   |
|----------------|--------------|-----------------------------|-----------------|-----------------------------|------------|
| nonprovisional | NO           | <del>\$3500</del><br>\$1330 | \$0             | <del>\$3500</del><br>\$1330 | 10/28/2003 |

| EXAMINER        | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| FORMAN, BETTY J | 1634     | 435-006000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Klarquist Sparkman, LLP  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Government of the United States of America

Rockville, MD

As represented by the Department of Health and Human Services

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☒ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☐ Publication Fee

☒ Advance Order - # of Copies 10

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Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

*Wayne W. Rupert*  
 (Authorized Signature)

Oct. 21, 2003  
 (Date)

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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10/24/2003 HTECKLU2 00000114 09622686

01 FC:1501

1330.00 OP

02 FC:8001

30.00 OP

TRANSMIT THIS FORM WITH FEE(S)



WR:jam 10/21/03 4239-55593 226308

PATENT

Attorney Reference Number 4239-55593

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Juha Kononen et al.

CERTIFICATE OF MAILING

Application No. 09/622,686

Filed: October 12, 2000

Confirmation No. 2751

For: TUMOR TISSUE MICROARRAYS FOR  
RAPID MOLECULAR PROFILING

Examiner: Betty J. Forman

Art Unit: 1634

Attorney Reference No. 4239-55593

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP ISSUE FEE, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney  
for Applicant(s)

*Wayne W. Rupert*

Date Mailed October 21, 2003

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TRANSMITTAL LETTER

Enclosed for filing in the above-referenced application are the following:

- ☒ In connection with issuance of a patent:
  - ☒ Form PTOL-85b
- ☒ Advance order of 10 copies (Fee \$30.00)
- ☒ Issue Fee (\$1330.00.00)
- ☒ A check in the amount of \$1,360.00 to cover the above-listed fees.
- ☒ The Director is hereby authorized to charge any additional fees that may be required in connection with issuance of a patent, or credit over-payment, to Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

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cc: Docketing